Summary sheet (Form RF-3) § <u>75</u>4. Exhibit A

SUMMARY SHEET
or rate level produced by rate revision effective _8/15/2005

| (1) | (2) Annual Premium | (3) Percent |
|--|--|---|
| Coverage | Volume (Illinois)* | Change (+ or -)** |
| 1. Automobile Liability Private | | |
| Passenger: | <u> </u> | |
| Commercial | , . | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | -10% |
| 9. Fire | 25,395. 21,085. | -10% |
| 10. Extended Coverage | 21,083. | -106 |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail 15. Other | | |
| Life of Insurance | | |
| Does filing only apply to certain territor _decrease fire & allied line | y (territories) or certain o s rates for all cl | classes? If so, specify: asses 10% overal1 |
| | | , |
| | | <u> </u> |
| Brief description of filing. (If filing follows | ows rates of an advisory | organization, specify |
| organization): | | |
| | | |
| | <u></u> | |
| *Adjusted to reflect all prior rate chang | ·os | |
| **Change in Company's premium level w | bich will result from appl | lication of new rates. |
| Change in Company's premium ieva " | C THOUGH OF | INSURANCE |
| | 可然是特殊 | Owns Missing ance Company |
| | . Mame of C | ompany . |
| | | |
| • | APR I | 8 2005 |
| · | | |
| | | ELD, ILLINOIS |

§ 754. Exhibit A Summary sheet (Form RF-3)

SUMMARY SHEET

| (1) | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|--|---|---|
| Coverage | Aotmus (Timore) | Dilatige (1 of) |
| Automobile Liability Private | | |
| Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | · · · · · · · · · · · · · · · · · · · | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| L. Burglary and Theft | | - |
| 5. Glass | | |
| 5. Fidelity | | |
| / Surety | | |
| R. Boiler and Machinery D. Fire | 635, 242 | |
| . Extended Coverage | 503,964 | |
| . Inland Marine | | |
| . Homeowners | • | |
| . Commercial Multi-Peril | | |
| . Crop Hail | | |
| Other | | |
| Life of Insurance | _ | |
| | | |
| | | |
| | (torritories) or certain | classes? If so, specify: |
| nes filing only apply to certain territo | ory (territories) or certain (| classes? If so, specify: |
| oes filing only apply to certain territo | ory (territories) or certain | classes? If so, specify: |
| nes filing only apply to certain territo | ory (territories) or certain o | classes? If so, specify: |
| | | ., |
| ief description of filing. (If filing fo | | ., |
| nes filing only apply to certain territories description of filing. (If filing for decrease our fire 10% overall | | ., |
| ief description of filing (If filing fo ganization): decrease our fire | | ., |
| ief description of filing (If filing fo ganization): decrease our fire | | ., |
| nief description of filing (If filing for decrease our fire 10% overall | llows rates of an advisory e & allied lines ra | organization specify tes for all classes |
| nief description of filing (If filing for decrease our fire 10% overall | llows rates of an advisory e & allied lines ra | organization specify tes for all classes |
| ief description of filing. (If filing fo decrease our fire 10% overall | llows rates of an advisory e & allied lines ra | organization specify tes for all classes |
| ief description of filing (If filing for decrease our fire 10% overall | llows rates of an advisory e & allied lines ra | organization specify tes for all classes |

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

APR 18 2005

SPRINGFIELD, ILLINOIS